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John C. Stennis Space Center
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John C. Stennis Space Center
Safety, Health and Environmental Tracking
(SHEtrak) System Corrective Action Request Process

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SUBJECT: Safety, Health and Environmental Tracking (SHEtrak) System Corrective Action Request Process		

Approved by:

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6/20/2016

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1.0 PURPOSE

This document defines the methods to process findings resulting from a safety, fire or quality discrepancy, submitted by National Aeronautics and Space Administration (NASA) Safety and Mission Assurance (SMA), John C. Stennis Space Center (SSC) Contractor Fire Department, or the NASA SMA Support Contractor during an inspection or surveillance. It also supports maintaining Occupational Safety and Health Administration (OSHA) Voluntary Protection Programs (VPP) Star Site certification and International Organization of Standardization (ISO) 9001 registration.

2.0 APPLICABILITY

This document applies to the NASA SSC personnel including contractors and resident agencies to the extent specified in their contracts or agreements.

3.0 REQUIREMENT AND REFERENCE DOCUMENTS

3.1 Requirement Documents

Requirement documents are the latest revision unless otherwise specified.

- a. 29 CFR 1910, *Code of Federal Regulations for General Industry*
- b. 29 CFR 1926, *Code of Federal Regulations for Construction Safety and Health Regulations*
- c. 29 CFR 1960.30, *Abatement of Unsafe or Unhealthful Working Conditions*
- d. NPR 8735.2, *Management of Government Quality Assurance Functions for NASA Contracts*
- e. NASA Form 1390, *Notice of Unsafe or Unhealthful Condition*
- f. NASA-STD 8719.11 *Safety Standard for Fire Protection*
- g. NPD 8730.5, *NASA Quality Assurance Program Policy*
- h. NPR 8715.3, *NASA General Safety Program Requirements*
- i. NPR 8800.15, *Real Estate Management Program*
- j. NPR 8831.2, *Maintenance and Operations of Institutional and Programs Facilities and Related Equipment*
- k. SPR 1280.1, *SSC Management System Policy*
- l. SPR 8500.1, *SSC Environmental Management System Procedural Requirements*

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3.2 Reference Documents

Reference documents are the latest revision unless otherwise specified.

- a. SCWI-3410-0002, *Training and Development Plan*
- b. SCWI-8710-0004, *SSC Internal and External Audit Process*
- c. SCWI-8715-0005, *Safety, Health, Housekeeping and Essential Item Inspections*
- d. SCWI-8830-0001, *Facility Manager Program Handbook*
- e. SMRI-1440-QA00, *SMA Master Records Index for Safety and Mission Assurance Directorate*
- f. SPLN-8838-0001, *SSC Fire Protection/Prevention Program Plan*
- g. SPR 1440.1, *Records Management Program Requirements*
- h. SPR 8715.1, *Safety and Health Program Requirements*
- i. SSC Form 715A, *Preventive / Corrective Action Request*
- j. SSC Form 879, *SSC Construction Safety Weekly Inspection*
- k. SSC Form 882, *NASA SSC Contractor Safety and Health Evaluation*

4.0 RESPONSIBILITIES

4.1 Center Director

The Center Director responsibilities are to:

- a. Provide resources for the implementation and maintenance of the processes described herein.
- b. Ensure that NASA SSC management and prime contractor management are aware of nonconformances that create site-wide impact and the required actions to resolve them.
- c. Ensure that NASA SSC management and prime contractor management are aware of the Corrective Action Requests (CARs) resulting from nonconformances and Opportunities for Improvement (OFI) issued to their respective organizations.

NOTE: When the term **CAR** is used **throughout this procedure**, it refers to **OFIs** and **nonconformances**.

4.2 NASA SMA Director

Ensure SMA employees have been trained on the proper use of the Safety, Health and Environmental Tracking (SHEtrak) system.

4.3 NASA Management Representative

The NASA Management Representative's responsibilities are to:

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- a. Define and initiate the process to resolve nonconformances that are documented and reported to NASA using forms designated in the References Section 3.2.
- b. Determine the criteria to evaluate effectiveness of the corrective action for the nonconformances.
- c. Determine and communicate required actions for any conditions that may affect the processes described herein.

4.4 NASA and Prime Contractor Management

Management shall ensure resources are provided to establish and maintain the corrective action process.

- a. Management responsibilities for CARs issued to their organizations are to:
 - (1) Respond to all CARs within 30 days or submit an abatement plan.
 - (2) Ensure CARs assigned to their organizations are worked until closure in a timely manner.
 - (3) Ensure employees in their organization are trained to use SHEtrak.
- b. Management responsibilities for continual improvement and monitoring are to:
 - (1) Assign responsibility and authority to appropriate personnel to review their operations and document nonconformances, OFIs, adverse trends, problems of critical nature, or systemic problems.
 - (2) Monitor actions from self-assessment findings to ensure:
 - (a) Nonconformances are resolved per their documented procedure.
 - (b) Adverse trends, problems of critical nature, or systemic issues beyond their organizational control are documented and reported to NASA SMA. (SSC Form 715A may be used as an alternate method for documentation.)

4.5 NASA Center Operations Personnel

NASA Center Operations Personnel responsibilities are to:

- a. Provide oversight and guidance to the onsite prime operations and maintenance contractor to ensure all CARs assigned to the contractor are worked until closure in a timely manner or an abatement plan is approved.
- b. Ensure the NASA SMA Facility Safety Point of Contact (POC) is informed at least 10 working days prior to occupancy of any unoccupied or mothballed facility to ensure a pre-occupancy inspection is conducted after work is completed, but prior to occupancy.
- c. Ensure the NASA SMA Facility Safety POC is informed prior to a change in occupancy of a facility in order to ensure a post occupancy inspection is conducted.

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- d. Ensure the Center Services, Facility Planning, and Utilization Division or Operations and Maintenance Division review and approve all abatement plans that extend over 3 months. (Approval can be added to the finding).
- e. Verify through contract surveillance that the SSC contractor Fire Department utilizes the SHEtrak system when performing Fire Prevention inspections and CARs are sent to SMA as well as to the Authority Having Jurisdiction on fire-related issues.

4.6 Synergy-Achieving Consolidated Operations and Maintenance (SACOM) Contractor

The SACOM Contractor shall:

- a. Ensure contractor personnel are trained on the usage of the SHEtrak system.
- b. Ensure contractor personnel are familiar with the contractor's policies, procedures, drawings, specifications, work control system and scope of work.
- c. Assign personnel to respond to CARs in SHEtrak.
- d. Correct deficiencies (CARs) within 30 days or submit an abatement plan for approval in SHEtrak.
- e. Post abatement plans on designated facilities as outlined in Section 5.5.
- f. Report CAR status, trend analyses, and metrics to NASA upon request.

4.7 NASA and Contractor Employees

It is the responsibility of employees to report potential safety nonconformances or issues identified to their respective facility manager and their respective management chain. If the potential safety nonconformance or issue cannot be resolved, the employee may report it to NASA SMA or use one of the reporting systems listed in SPR 8715.1, *Safety and Health Program Requirements*.

4.8 NASA SMA Facility Safety Point of Contact

The NASA SMA Facility Safety POC shall:

- a. Maintain and implement this procedure.
- b. Review and approve or reject inspection results prior to final approval.
- c. Review and approve or reject recommendations for CARs.
- d. Review and approve or reject responses to CARs.
- e. Verify containment actions and corrective actions are implemented as described in the response to the nonconformance. The containment is the immediate action taken to correct the nonconformance.
- f. Verify abatement plans are implemented as described in the response to the nonconformance.

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- g. Initiate CARs for major nonconformances.
- h. Review and approve or reject CARs for closure.
- i. Report the status of CARs to management.
- j. Recommend awareness publications or training if warranted.
- k. Approve NASA Access Management System (NAMS) requests for access to the SHEtrak system.

4.9 NASA SMA Personnel

The NASA SMA personnel assigned to a facility shall:

- a. Review and approve responses to CARs for the facility assigned to them.
- b. Initiate Major CARs.
- c. Verify containment actions and corrective actions are implemented as described in the response to the nonconformance, particularly in critical and complex areas as per the NASA Policy Directive, NPD-8730.5, *NASA Quality Assurance Program Policy*.
- d. Verify abatement plans are implemented as described in the response to the nonconformance.
- e. Review and approve or reject responses to CARs for closure.

4.10 SMA Support Contractor

4.10.1 The SMA Support Contractor Management

The SMA Support Contractor Management shall:

- a. Ensure SMA Support Contractor personnel are trained on the usage of the SHEtrak system.
- b. Ensure the SMA Support Contractor personnel are familiar with the contractor's policies, procedures, drawings, specifications, work control systems, and scope of work.
- c. Report CAR status, trend analyses, and metrics to NASA monthly.
- d. Identify personnel to serve as the SSC SHEtrak Administrator.

4.10.2 The SMA Support Contractor personnel

The SMA Support Contractor personnel shall:

- a. Record inspections and findings into the SHEtrak system.
- b. Document "corrected on the spot" corrective actions in the SHEtrak system.
- c. Collaborate with the CAR assignee to ensure timely and effective corrective action for minor CARs including identification of root cause(s) for the discrepancy, scope of the discrepancy, containment actions, and measures taken or planned to prevent recurrence of the discrepancy.
- d. Follow-up with the CAR assignee to ensure effective accomplishment of corrective and preventive actions.
- e. Gather implementation and effectiveness evidence, as required.

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f. Review implementation and effectiveness evidence.

4.10.3 The SSC SHetrak Administrator

The SSC SHetrak Administrator shall:

- Update SHetrak with the user's roles as defined in the user's approved NAMS application.
- Perform SHetrak training as needed/required.
- Implement continuous improvement to the SHetrak system.

NOTE: *The SHetrak system is administered and maintained by the Marshall Space Flight Center (MSFC).*

4.11 Fire Department

4.11.1 The Fire Department Management

The Fire Department Management shall:

- Ensure Fire Department personnel are trained on the usage of the SHetrak system.
- Ensure Fire Department Contractor personnel are familiar with the contractor's policies and procedures, drawings, specifications, work control system and scope of work.
- Report CAR status, trend analyses, and metrics to NASA upon request.

4.11.2 The Fire Department personnel

The Fire Department personnel shall:

- Record fire-related inspections and findings into the SHetrak system.
- Document "corrected on the spot" corrective actions in the SHetrak system.
- Send CARs through SHetrak to SMA Facility Safety POC and the Authority Having Jurisdiction for information only.
- Collaborate with the CAR assignee to ensure timely and effective corrective action for minor CARs including identification of root cause(s) for the discrepancy, scope of the discrepancy, containment actions, and measures taken or planned to prevent recurrence of the discrepancy.
- Follow-up with the CAR assignee to ensure effective accomplishment of corrective and preventive actions.
- Gather implementation and effectiveness evidence, as required.
- Review implementation and effectiveness evidence.

4.12 SMA Personnel and Subject Matter Experts (SMEs)

SMA Personnel and SMEs assist the NASA Facility Safety POC as needed and/or requested as follows:

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- a. Review nonconformance findings.
- b. Review the response to a nonconformance.
- c. Monitor implementation of the nonconformance corrective action plan.
- d. Review implementation and effectiveness evidence.
- e. Recommend action based on the status in the process.

4.13 CAR Assignee

The CAR assignee is the person (for example, the facility manager, process owner, or supervisor) assigned to resolve the issue.

4.13.1 OFI assignee

The OFI assignee shall respond within the allotted timeframe of this procedure and assure management approval of the response prior to submitting the response via SHEtrak.

4.13.2 Nonconformance assignee

The nonconformance assignee shall:

- a. Respond within the allotted timeframe of this procedure.
- b. Assure management approval to the response prior to submitting the response via SHEtrak.
- c. Ensure implementation of containment and corrective action.
- d. Provide implementation evidence.
- e. Provide effectiveness evidence, when applicable.
- f. Assure management approval of abatement plan prior to submitting plan via SHEtrak.

5.0 CORRECTIVE ACTION REQUEST PROCESS

The CAR process provides a vehicle to document and report discrepancies that are noted by NASA SMA, SMA Support Contractors, SSC Contractor Fire Department, or other SSC contractors. Allocating time to the different process steps completes the set of controls needed to process a finding and monitor progress until the finding is resolved and the record is closed in SHEtrak.

The intent of the corrective action process is to manage the corrective actions in a timely and reasonable manner, and have the nonconformance corrected within 30 days after the CAR is issued; otherwise, an abatement plan must be submitted and approved. A closure with rationale or an abatement plan must be assigned to each nonconformance entered into the SHEtrak system.

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5.1 Inspections / Surveillance

The NASA SMA, SMA Support Contractors, SSC Contractor Fire Department, or other SSC contractors as required by their contracts are responsible for entering inspections and surveillance findings (OFI and nonconformances) into SHEtrak. The findings may be from any of the following, but not limited to:

- a. Construction Inspection
- b. Construction Inspection Monthly
- c. Construction Inspection Weekly
- d. Explosives Inspection
- e. Final Inspection
- f. Annual Facility Safety Inspection
- g. Emergency Drill
- h. Fire Prevention Inspections
- i. Safety Hazard Area Inspection
- j. Safety Spot Inspection
- k. Senior Management Safety Inspection
- l. Foreign Object Debris (FOD) Inspection
- m. Mandatory Inspection

5.2 Findings

OFI, nonconformance, and severities of nonconformances are defined in Appendix B. The four (4) severities of nonconformances are:

- a. Major Nonconformance - Any nonconformance that is:
 - (1) Immediate Danger to Life or Health (IDLH) requiring immediate action to ensure the safety and health of personnel (all IDLH nonconformances must be documented in SHEtrak by the end of the inspector's work shift); (in addition to documenting the nonconformance in SHEtrak, immediate actions shall be taken to mitigate, control or isolate the IDLH condition and the condition shall be reported to senior management);
 - (2) Discrepancy that is likely to result in failure, or to materially reduce the usability of the supplies or services for their intended purpose;
 - (3) Discrepancy that judgment and experience indicates is likely to result in hazardous or unsafe conditions for individuals using, maintaining, or depending upon the supplies or services, or is likely to prevent performance of a vital mission; or
 - (4) Systemic issue that is a problem due to issues inherent in the overall system, rather than due to a specific, individual, isolated factor or event. (When systemic problems are identified, a new CAR is submitted through the SHEtrak system as a new inspection.)

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The appropriate management chain will be notified of all major nonconformances. Major nonconformances are sent to management representatives, and a management response is required within 10 working days. If a response is not received within 10 working days, it is escalated to the next level of management, or senior management (General Manager, Director, or Center Director).

- b. Minor Nonconformances are neither major nor systemic in nature, but cannot be corrected on the spot.
- c. Corrected on the Spot Nonconformances are corrected at the time they are identified. They are recorded in SHEtrak as such.
- d. Opportunity for Improvement (OFI): The primary objective is to address impending, emerging, or potential problems or issues that may increase the process or management risk. An OFI aims at directing attention to a potential problem or concern to avoid or prevent a potential fault from occurring.

Although action is recommended for an OFI, it does not *require* corrective action. A response is required for an OFI. (An appropriate response to an OFI can be “taken under advisement, with no corrective action at this time”.)

5.2.1 Submission of a Finding

Findings are entered into SHEtrak within 15 working days from the time of completion of the inspection or surveillance.

- a. When submitting an OFI, it shall:
 - (1) Identify the location of the finding.
 - (2) Identify the weakness observed and quantity if possible.
 - (3) Explain why or how this weakness could become a nonconformance.
- b. When submitting a nonconformance, it shall:
 - (1) Identify the location of the finding.
 - (2) Identify the violation requirement that was not in compliance.
 - (3) Provide any additional information (if more than one code was violated / applicable).
 - (4) Identify the severity.
 - (5) Include evidence of the stated nonconformance (such as records requested but not provided; sample size and nonconformances found; or pictures of the nonconformance, when allowed).
 - (6) If the nonconformance is a repeat offense, notification shall be sent to the contractor management and NASA SMA Management. If warranted, the Contracting Officer or Contracting Officer Representative (COR) may also be notified along with other NASA management.

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5.2.2 Response to a Finding

The CAR Assignee is responsible for responding to findings in SHEtrak, when notified. The assignees will receive a notification from SHEtrak via email with a corrective action number assigned to the OFI/nonconformance. When SHEtrak is accessed, a CAR will be visible with all pertinent information.

- a. When responding to an OFI, the response shall:
 - (1) Acknowledge receipt of the OFI.
 - (2) Provide a description of action to be taken (preferred but optional).
- b. When responding to a nonconformance, the response shall:
 - (1) Include a containment action, an Estimated Completion Date (ECD), and record(s) to be provided as evidence of implementation if necessary.
 - (2) Include a corrective action, a completion date, and record(s) to be provided as evidence of implementation.
 - (3) Identify any necessary action that is not under the organization's control to include:
 - (a) State the action.
 - (b) Identify the responsible organization and the POC.
 - (c) State the length of time to implement the action.
 - (d) Identify the records that will serve as evidence of implementation.
 - (e) Provide evidence of agreement from that other organization.
 - (4) Include time in the ECD that considers the time needed for:
 - (a) Implementation; and
 - (b) Gathering and providing implementation evidence.
 - (5) Include an abatement plan and schedule when corrective action implementation takes more than 30 days from the CAR notification date. If more time is needed after initial abatement plan is approved, a request must be submitted through a revised abatement plan in SHEtrak.
 - (6) Include objective evidence when submitting a nonconformance for closure. Examples of objective evidence are photographs of the completed work (highly recommended), completed and signed procedures, copy of the email where correction was completed (for occupant issues), etc.
- c. When a major nonconformance is issued for systemic problems, the assignee shall ensure the following:
 - (1) Root Cause Analysis (RCA) is performed and correct.
 - (2) Corrective action plan to correct noted deficiencies is appropriate.
 - (3) Implementation of corrective action is performed as planned.
 - (4) Corrective action yields expected outcome.

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5.3 Safety Health and Environment Tracking (SHEtrak) System

SHEtrak is the software application used to store and process inspections and findings. It is located at https://safety.msfc.nasa.gov/apps/TPS/TPS_Main.asp. In particular, for nonconformances, SHEtrak sends email notifications on:

- Inspections performed
- Findings/nonconformances
- Corrective action implementation
- Approved closures

5.4 Corrective Action

The corrective action process is initiated when a finding is identified as a nonconformance or OFI during an inspection or surveillance. The corrective action process flows are described in Appendices C-D. Additional steps are incorporated into the corrective action process, when the following circumstances are present:

- The finding is rejected by the Facility Safety POC – If a nonconformance finding is rejected, it is returned to the submitter for revision and stays in the “review, reject, rework” cycle until the entry is deemed satisfactory or it is removed from the system.
- The organization needs additional time to respond to the CAR – If additional time is needed, a new abatement plan must be submitted via SHEtrak. The request shall include a justification and the immediate supervisor’s name and phone number. The request may be approved, if the abatement plan meets the requirements in 5.2.2 c; otherwise, it will be rejected.
- The response is overdue – If the response to a CAR is overdue, the Facility Safety POC will ensure the assignee is aware of the situation; additional personnel may be notified as well. If warranted, notification will be sent to contractor management, NASA SMA Management, Contracting Officer, or COR.
- The response to a nonconformance is rejected – If a response to a nonconformance is rejected, it is returned to the assignee for revision and stays in the “review, reject, rework” cycle until the entry is deemed satisfactory.
- The organization needs additional time to implement a corrective action or abatement plan – See Section 5.2.2.b.5. Allocating time to the different process steps completes the set of controls needed to process a finding and monitor progress until the finding is resolved and the record is closed in SHEtrak.

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5.5 Abatement Plans

An abatement plan is a detailed description of a planned mitigation for a safety or health hazard/violation or a containment action to ensure process integrity and product quality. If discrepancies are expected to take longer than 30 days, an abatement plan is required.

The CAR Assignee assures management approval of the abatement plan prior to submitting it in SHEtrak. NASA SMA has the final review and approval or rejection of abatement plans. If an abatement plan is rejected by SMA, rationale for rejection must be provided.

Findings will remain in an open status when an active abatement plan is in place. NASA SMA shall review the CAR status periodically to ensure no employee exposure occurs, and the CAR assignee shall update/revise the abatement plan as required. This process shall continue until the discrepancies are corrected.

NOTE: All findings that could be considered IDLH shall be addressed immediately.

Inspection results related to safety and health inspections are to be communicated to employees in the immediate work area where the non-compliances were discovered. The communication for safety and health discrepancies can be made by posting the SHEtrak Inspection Report. Postings are for three (3) days or until the violation(s) are corrected (whichever is longer) in the building's common area, near an entrance, or near the violation area (whichever is appropriate). See 29 CFR 1960.26(c)(4). This applies to Active and Inactive Facilities. (Quality discrepancies may also have abatement plans, but quality abatement plans are NOT posted.)

5.5.1 Active Facility Abatement Plan

If an abatement plan is used for an active facility, it shall include the following:

- ECD
- Reason finding cannot be closed
- Interim action including safeguards in place until the condition is abated
- Proposed action to close the finding

5.5.2 Inactive Facility Abatement Plan

- Inactive facilities are currently not needed to support a NASA mission or function but may have a planned need in the future. There are three (3) subcategories for inactive facilities—Standby, Mothballed, and Abandoned, which are defined in NASA Procedural Requirement, NPR 8800.15, *Real Estate Management Program*. Inactive facilities are un-occupied and secured, but may be entered on a limited basis, for preventive maintenance, to show possible tenants, or awaiting demolition. The

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findings with these facilities are placed into a group abatement plan for the complex. These abatement plans are entered by the Operations and Maintenance O&M Prime Contractor.

- b. NASA Form 1390, *Notice of Unsafe or Unhealthful Condition*, may be used to accompany the abatement plan, or a copy of the abatement plan from SHEtrak. A list of findings shall include information such as Finding ID, Inspection Type, Building, Room/Location, Violation, Additional Violation Information, and Hazard Probability/Severity as required by OSHA.
- c. Abatement plans for abandoned or mothballed facilities does **NOT** negate safety inspections of occupied or unoccupied facilities per NPR 8715.3, *NASA General Safety Program Requirements*. The inspection must be accomplished at least annually to ensure compliance with safety, fire protection, building codes, and standards.
- d. Abandoned or Mothballed Facilities are **NOT** subject to monthly or quarterly inspections as required SCWI-8715-0005, *Safety, Health, Housekeeping and Essential Item Inspections*.

NOTE: *Occasionally, a mothballed facility may be used for storage. In this case, the abatement plan does not negate annual inspections, and housekeeping inspections are still required per SCWI-8715-0005.*

If a mothballed or abandoned facility is leased or to be occupied, a facility inspection shall be completed by NASA SMA or NASA Support Contractor. The safety findings associated with the facility shall be addressed per SCWI-8715-0005, *Safety, Health, Housekeeping and Essential Item Inspections*. NASA Industrial Hygienist (or designee) may be asked to participate in these inspections for review of potential health hazards (e.g., mold, or non-intact coatings).

- e. NASA SMA shall review the facility/discrepancy status annually to ensure no employee exposure occurs, and the facility manager shall update/revise the abatement plan. This process continues until the facility is to be occupied, or the findings are corrected / closed.

5.6 Verification of Corrective Action

Verification of the corrective action is an activity performed before or after closure on designated nonconformances. Some verifications are performed by NASA SMA Support Contractor or the SSC Contractor Fire Department according to their contract requirement. Other verifications may be performed by NASA SMA. Some verifications are accomplished by other means (e.g., photos), and the results recorded in SHEtrak. If the corrective action is deemed not effective, a new CAR will be issued, noting the previous nonconformance.

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5.7 Verification of Corrective Action Effectiveness

Verification of the corrective action effectiveness is an activity performed after closure on designated nonconformances. NASA SMA, the NASA SMA Support Contractor, or the SSC Contractor Fire Department will perform verification of corrective action effectiveness and record results in SHEtrak. A new CAR will be issued if the corrective action is deemed not effective noting the previous nonconformance.

6.0 REPORTS

Periodically, a report on open CARs is generated and presented to SMA management and the Management Representative. CARs signaling unfavorable conditions will be noted in the report. An unfavorable condition is assessed in terms of overdue responses, overdue implementation, and failed effectiveness verification.

7.0 RECORDS AND FORMS

Records kept as evidence of performance are:

- a. Open CAR Status Reports
- b. Data Analysis Reports
- c. SHEtrak system – No hard copy records are kept for findings processed via SHEtrak.

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APPENDIX A - ACRONYMS AND ABBREVIATIONS

CAP	Corrective Action Plan
CAR	Corrective Action Request
CFR	Code of Federal Regulations
COR	Contracting Officer Representative
ECD	Estimated Completion Date
FOD	Foreign Object Debris
IDLH	Immediate Danger to Life or Health
ISO	International Organization of Standardization
MSFC	Marshall Space Flight Center
NASA	National Aeronautics and Space Administration
NPD	NASA Policy Directive
NPR	NASA Procedural Requirement
O&M	Operations and Maintenance
OFI	Opportunity for Improvement
OSHA	Occupational Safety and Health Administration
POC	Point of Contact
RCA	Root Cause Analysis
SACOM	Synergy Achieving Consolidated Operations and Maintenance
SCWI	SSC Common Work Instruction
SHEtrak	Safety, Health and Environmental Tracking System
SMA	Safety and Mission Assurance

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SME Subject Matter Experts

SPR SSC Procedural Requirement

SSC John C. Stennis Space Center

VPP Voluntary Protection Program

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APPENDIX B-- DEFINITIONS

Abatement Plan: A detailed description of correction for a safety or health hazard/violation that could lead to an OSHA citation; i.e., the process of monitoring or reducing the release or exposure to a hazard.

Abandoned Facility: A facility where there are no reactivation plans. Facility systems and collateral equipment will be considered for excess. Plans are in place to demolish or declare the facility excess at the earliest practical date.

Active Facility: A facility where assets are needed to support a current NASA mission, program, or function.

Audit: Analysis, investigation, review, inspection, examination, evaluation, or other similar process, whether conducted by internal personnel or by external third parties, to verify conformance/compliance with documented requirements.

Assignee: Person responsible to respond to an OFI or nonconformance.

Containment: Immediate action taken to correct the nonconformance finding.

Corrected on the Spot Nonconformance: Violation of a federal, state or local safety or health statute or regulation and/or a NASA Agency or NASA SSC requirement that was corrected at the time of the inspection.

Corrective Action: The mechanism for effectively responding to a customer complaint or non-conforming product, service, or documentation. The corrective action process provides appropriate action through established management channels to correct conditions that produce nonconformities by identifying and eliminating the causes and implementing changes to ensure they do not recur. Corrective actions are measures taken to eliminate the causes of a nonconformance in order to prevent recurrence.

Corrective Action Plan (CAP): Statement of activities to be performed to effect corrective action.

Corrective Action Request (CAR): Documentation of a nonconformance or finding within the SHEtrak audit tool.

Effective: To verify that a corrective action yields anticipated outcome.

Evidence: Qualitative or quantitative information that are records or statements of fact, based on observations, measurement, or tests that can be verified, pertaining to the Management System

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Requirements; statutory, regulatory or contractual requirements; customer requirements; or system standard of an item or service as to the existence and implementation of a system element.

Facility Safety Point of Contact: SMA civil servant who manages the facility safety program.

Finding: It is a violation of a federal, state, or local safety or health statute or regulation and/or a NASA Agency or NASA SSC requirement. A finding is the result of an inspection, official audit, or individual assessment of a situation. It could be an actual or potential nonconformance, an improvement or a noteworthy observation.

Inactive Facility: A facility where assets are not currently needed to support a NASA mission or function but will have a planned need in the future. There are three (3) subcategories for inactive facilities — Standby, Mothballed, and Abandoned

Major Nonconformance: Any nonconformance that is IDLH requiring immediate action to ensure the safety and health of personnel. It can also be a systemic issue that is a problem due to an overall system failure rather than due to a specific, individual, isolated factor.

Management Representative: This term refers to the ISO 9001 Management Representative and/or the ISO 14001 Management Representative.

Minor Nonconformance: A discrepancy that is a specific, individual, isolated factor and not of a systemic nature. It may be an isolated violation of federal, state, or local safety or health statutes or regulations and/or a NASA Agency or NASA SSC requirements.

Mothballed Facility: Facilities where assets are temporarily not in use and have an anticipated reactivation period of more than 36 months.

Nonconformance: Violation of a federal, state or local safety or health statute or regulation and/or a NASA Agency or NASA SSC requirement. For purposes of this procedure, other terms that designate a requirement violation, such as a noncompliance or finding, shall be considered equivalent to a nonconformance.

Opportunity for Improvement (OFI): Conformance to the applicable requirement may be satisfactory, however a weakness exists that could result in a nonconformance. The primary objective is to address impending, emerging or potential problems or issues that may increase the process or management risk. An OFI aims at directing attention to a potential problem or concern to avoid or prevent a potential fault from occurring.

Process: A set of interrelated or interacting activities that transforms inputs into outputs.

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Root Cause: The underlying reason for one or more nonconformances or deficiencies identified through investigations and studies that, when corrected, will prevent or reduce the recurrence of the realized or potential nonconformance.

Root Cause Analysis: A collective term that describes a wide range of approaches, tools, and techniques used to uncover causes of problems.

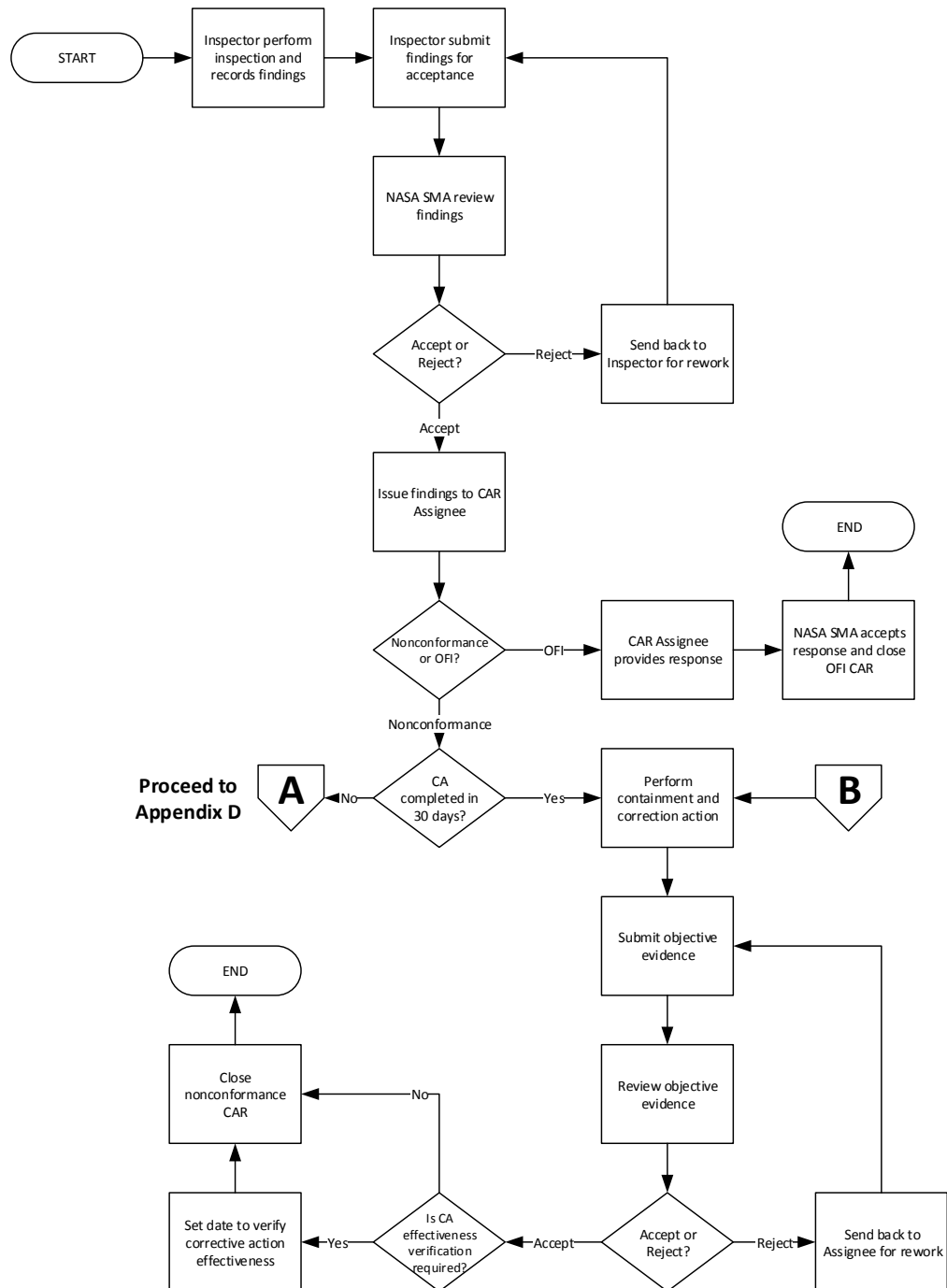
Standby Facility: A facility where assets are temporarily not in use and have an anticipated reactivation period of less than 36 months.

Systemic Problem: A systemic problem is a problem due to issues inherent in the overall system, rather than due to a specific, individual, isolated factor. A change to the structure, organization, or policies in that system could alleviate the systemic problem.

Verify: To corroborate that a corrective action continues to be effective. For purposes of this procedure, to verify is the same as to validate.

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APPENDIX C – SHETRAK PROCESS FLOW



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APPENDIX D – ABATEMENT PROCESS FLOW

